

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET							SERIAL NO. <u>10522-117</u>	FILING DATE				
							APPLICANT(S)					
10-11-06							CLAIMS					
	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT							
	IND	DEP	IND	DEP	IND	DEP						
1	1		1				91					
2							92					
3							93					
4							94					
5							95					
6							96					
7							97					
8		7		7			98					
9	1		1				99					
10							100					
11												
12												
13												
14												
15												
16		7		7								
17	1		1									
18												
19												
20												
21												
22												
23												
24		7		7								
25	1		1									
26												
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32		7		7								
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45												
46												
47												
48												
49												
50												
TOTAL IND.	4		4				TOTAL IND.					
TOTAL DEP.	52		52				TOTAL DEP.					
TOTAL CLAIMS	56						TOTAL CLAIMS					